

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

SouthernDistrict of OhioCase number  
(If known)

Chapter you are filing under:

- ☒ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☐ Chapter 13

☐ Check if this is an amended filing

**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself****About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Elizabeth  
First name

A.  
Middle name

Morgan  
Last name

\_\_\_\_\_  
Suffix (Sr., Jr., II, III)

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

Elizabeth  
First name

A.  
Middle name

Shirk  
Last name

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
Last name

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
Last name

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
Last name

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

XXX - XX - 1 2 6 6

OR

**9** XX - XX -            

XXX - XX -            

OR

**9** XX - XX -

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**Include trade names and  
doing business as names☒ I have not used any business names or EINs.☐ I have not used any business names or EINs.

Business name

Business name

Business name

Business name

EIN

EIN

EIN

EIN

**5. Where you live****If Debtor 2 lives at a different address:**5312 Taywell Drive  
Number Street

Number Street

Springfield OH 45503  
City State ZIP Code

City State ZIP Code

Clark  
County

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.**If Debtor 2's mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number Street

Number Street

City State ZIP Code

City State ZIP Code

**6. Why you are choosing this district to file for bankruptcy***Check one:*☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)*Check one:*☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason. Explain.  
(See 28 U.S.C. § 1408.)

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**Part 2:** Tell the Court About Your Bankruptcy Case**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☒ Chapter 7
- ☐ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13

**8. How you will pay the fee**

- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay Your Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**

- ☒ No
- ☐ Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

- ☒ No
- ☐ Yes. Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY
- Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY

**11. Do you rent your residence?**

- ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Elizabeth A.

Document  
Last Name

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Case number (if known)

**Part 3:** Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**☒ No. Go to Part 4.☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.**Part 4:** Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**☒ No☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**Part 5:** Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**Part 6:** Answer These Questions for Reporting Purposes**16. What kind of debts do you have?**

16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

☐ No. Go to line 16b.

☒ Yes. Go to line 17.

16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

☐ No. Go to line 16c.

☐ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

**17. Are you filing under Chapter 7?**

☐ No. I am not filing under Chapter 7. Go to line 18.

**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**

☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

☒ No

☐ Yes

**18. How many creditors do you estimate that you owe?**

☒ 1-49

☐ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5,001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

**19. How much do you estimate your assets to be worth?**

☐ \$0-\$50,000

☐ \$50,001-\$100,000

☒ \$100,001-\$500,000

☐ \$500,001-\$1 million

☐ \$1,000,001-\$10 million

☐ \$10,000,001-\$50 million

☐ \$50,000,001-\$100 million

☐ \$100,000,001-\$500 million

☐ \$500,000,001-\$1 billion

☐ \$1,000,000,001-\$10 billion

☐ \$10,000,000,001-\$50 billion

☐ More than \$50 billion

**20. How much do you estimate your liabilities to be?**

☐ \$0-\$50,000

☐ \$50,001-\$100,000

☒ \$100,001-\$500,000

☐ \$500,001-\$1 million

☐ \$1,000,001-\$10 million

☐ \$10,000,001-\$50 million

☐ \$50,000,001-\$100 million

☐ \$100,000,001-\$500 million

☐ \$500,000,001-\$1 billion

☐ \$1,000,000,001-\$10 billion

☐ \$10,000,000,001-\$50 billion

☐ More than \$50 billion

**Part 7:** Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X**

/S/ Elizabeth A. Morgan

Signature of Debtor 1

**X**

/S/

Signature of Debtor 2

Executed on 04/18/2019

MM / DD / YYYY

Executed on \_\_\_\_\_

MM / DD / YYYY

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**If you are not represented by an attorney, you do not need to file this page.**

X

/S/ Brian E. Lusardi

Date

04/18/2019

Signature of Attorney for Debtor

MM / DD / YYYY

Brian E. Lusardi

Printed name

Cox, Keller &amp; Lusardi, LLC

Firm name

85 West Main Street

Number Street

Xenia

City

OH

State

45385

ZIP Code

Contact phone (937) 372-6921

Email address cox\_keller@yahoo.com

0080294

Bar number

Ohio

State

## Fill in this information to identify your case:

Debtor 1 Elizabeth A. Morgan  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Ohio

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing.

## Official Form 106A/B

## Schedule A/B Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

## 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1. 5312 Taywell Drive  
Street address, if available, or other description

Springfield OH 45503  
City State ZIP Code

Clark  
County

## What is the property? Check all that apply.

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 120,790.00 \$ 120,790.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

## Who has an interest in the property? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

Fee \_\_\_\_\_

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

If you own or have more than one, list here:

1.2. \_\_\_\_\_  
Street address, if available, or other description

\_\_\_\_\_  
City State ZIP Code

\_\_\_\_\_  
County

## What is the property? Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

## Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_



Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

1.3. \_\_\_\_\_  
Street address, if available, or other description

\_\_\_\_\_  
City State ZIP Code

\_\_\_\_\_  
County

**What is the property?** Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

**Other information you wish to add about this item, such as local property identification number:** \_\_\_\_\_

2. **Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.** .....

\$ 120,790.00

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No  
☒ Yes

3.1. Make: Honda  
 Model: Accord  
 Year: 2016  
 Approximate mileage: 50k miles  
 Other information:  
 \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ 15,000.00 \$ 15,000.00

If you own or have more than one, describe here:

3.2. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Approximate mileage: \_\_\_\_\_  
 Other information:  
 \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

3.3. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Approximate mileage: \_\_\_\_\_  
 Other information:  
 \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

3.4. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Approximate mileage: \_\_\_\_\_  
 Other information:  
 \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No  
☐ Yes

4.1. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Other information:  
 \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Other information:  
 \_\_\_\_\_

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?** **Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here** →

\$ 15,000.00

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**Part 3:** Describe Your Personal and Household Items**Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware☐ ..No☒ ..Yes. Describe. ....

Household Furnishings

\$ 4,500.00

**7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ ..No☒ ..Yes. Describe. ....

Electronics

\$ 500.00

**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☐ ..No☐ ..Yes. Describe. ....

\$

**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ ..No☐ ..Yes. Describe. ....

\$

**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ ..No☐ ..Yes. Describe. ....

\$

**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ ..No☒ ..Yes. Describe. ....

Assorted Clothing

\$ 600.00

**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ ..No☒ ..Yes. Describe. ....

Everyday Jewelry

\$ 250.00

**13. Non-farm animals***Examples:* Dogs, cats, birds, horses☒ ..No☐ ..Yes. Describe. ....

\$

**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ ..No☐ ..Yes. Describe. ....

\$

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**

\$ 5,850.00

Elizabeth

A.

First Name

Middle Name

Last Name

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes

Cash: \$ 30.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes

Institution name:

17.1. Checking account: Honda Fed-Bank Account\$ 200.00

17.2. Checking account:\$

17.3. Savings account:\$

17.4. Savings account:\$

17.5. Certificates of deposit:\$

17.6. Other financial account:\$

17.7. Other financial account:\$

17.8. Other financial account:\$

17.9. Other financial account:\$

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes

Institution or issuer name:

\$

\$

\$

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☒ No

☐ Yes. Give specific information about them.

Name of entity:

% of ownership:

-0.00 %

-0.00 %

-0.00 %

\$

\$

\$

Official Form 106A/B

Schedule A/B: Property

page 5

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No
 

☐ Yes. Give specific information about them.....
 Issuer name:
 

\$

\$

\$

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No
 

☒ Yes. List each account separately.
 Type of account:
 Institution name:
 

401(k) or similar plan: 401k-Honda

Pension plan:

IRA:

Retirement account:

Keogh:

Additional account:

Additional account:

\$ 78,496.00

\$

\$

\$

\$

\$

\$

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No
 

☐ Yes .....
 Institution name or individual:
 

Electric:

Gas:

Heating oil:

Security deposit on rental unit:

Prepaid rent:

Telephone:

Water:

Rented furniture:

Other:

\$

\$

\$

\$

\$

\$

\$

\$

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No
 

☐ Yes .....
 Issuer name and description:
 

\$

\$

\$

Debtor 1

Elizabeth

A.

Document

Page 14 of 53

Case number (if known)

First Name

Middle Name

Last Name

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes ..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☒ No☐ Yes. Give specific information about them.

\$ \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☒ No☐ Yes. Give specific information about them.

\$ \_\_\_\_\_

**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☒ No☐ Yes. Give specific information about them.

\$ \_\_\_\_\_

**Money or property owed to you?****Current value of the portion you own?**  
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

Federal: \$ \_\_\_\_\_

State: \$ \_\_\_\_\_

Local: \$ \_\_\_\_\_

**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information. ....

Alimony: \$ \_\_\_\_\_

Maintenance: \$ \_\_\_\_\_

Support: \$ \_\_\_\_\_

Divorce settlement: \$ \_\_\_\_\_

Property settlement: \$ \_\_\_\_\_

**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☒ No☐ Yes. Name the insurance company of each policy and list its value. ....

Company name:

Beneficiary:

Surrender or refund value:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim. ....

\$ \_\_\_\_\_

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim. ....

\$ \_\_\_\_\_

**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here**

\$ 78,726.00

**Part 5:** Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**☒ No☐ Yes. Describe. ....

\$ \_\_\_\_\_

**39. Office equipment, furnishings, and supplies***Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices☒ No☐ Yes. Describe. ....

\$ \_\_\_\_\_

Debtor 1

Elizabeth

A.

Document

Page 16 of 53

Case number (if known)

First Name

Middle Name

Last Name

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☒ No☐ Yes. Describe.

\$ \_\_\_\_\_

**41. Inventory**☒ No☐ Yes. Describe.

\$ \_\_\_\_\_

**42. Interests in partnerships or joint ventures**☒ No☐ Yes. Describe ..... Name of entity:

% of ownership:

0.00%

\$ \_\_\_\_\_

0.00%

\$ 0.00

0.00%

\$ \_\_\_\_\_

**43. Customer lists, mailing lists, or other compilations**☒ No☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe. ....

\$ \_\_\_\_\_

**44. Any business-related property you did not already list**☒ No☐ Yes. Give specific information

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here**

\$ 0.00

**Part 6:** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**☒ No. Go to Part 7.☐ Yes. Go to line 47.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**47. Farm animals**

Examples: Livestock, poultry, farm-raised fish

☒ No☐ Yes .....

\$ \_\_\_\_\_



Debtor 1

Elizabeth

A.

Document

Page 17 of 53

Case number (if known)

First Name

Middle Name

Last Name

**48. Crops—either growing or harvested**☒ No☐ Yes. Give specific information.....

\$ \_\_\_\_\_

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**☒ No☐ Yes .....

\$ \_\_\_\_\_

**50. Farm and fishing supplies, chemicals, and feed**☒ No☐ Yes .....

\$ \_\_\_\_\_

**51. Any farm- and commercial fishing-related property you did not already list**☒ No☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** →

\$ 0.00

**Part 7:** Describe All Property You Own or Have an Interest in That You Did Not List Above**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

☒ No☐ Yes. Give specific information. ....

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**54. Add the dollar value of all of your entries from Part 7. Write that number here** →

\$ 0.00

**Part 8:** List the Totals of Each Part of this Form**55. Part 1: Total real estate, line 2** →

\$ 120,790.00

**56. Part 2: Total vehicles, line 5** \$ 15,000.00**57. Part 3: Total personal and household items, line 15** \$ 5,850.00**58. Part 4: Total financial assets, line 36** \$ 78,726.00**59. Part 5: Total business-related property, line 45** \$ 0.00**60. Part 6: Total farm- and fishing-related property, line 52** \$ 0.00**61. Part 7: Total other property not listed, line 54** + \$ 0.00**62. Total personal property. Add lines 56 through 61**.....

\$ 99,576.00

Copy personal property total → + \$ 99,576.00

**63. Total of all property on Schedule A/B. Add line 55 + line 62**.....

\$ 220,366.00

## Fill in this information to identify your case:

Debtor 1 Elizabeth A. Morgan  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Ohio

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing.

## Official Form 106C

## Schedule C: The Property You Claim As Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

## Part 1: Identify the Property You Claim as Exempt

## 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: <u>Household Furnishings</u> Line from <i>Schedule A/B</i> : <u>6</u>	\$ <u>4,500.00</u>	<input checked="" type="checkbox"/> \$ <u>4,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Household furnishings, goods, animals/...</u> <u>R.C. 2329.66(A)(4)(a)</u>
Brief description: <u>Electronics</u> Line from <i>Schedule A/B</i> : <u>7</u>	\$ <u>500.00</u>	<input checked="" type="checkbox"/> \$ <u>500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Household furnishings, goods, animals/...</u> <u>R.C. 2329.66(A)(4)(a)</u>
Brief description: <u>Everyday Jewelry</u> Line from <i>Schedule A/B</i> : <u>12</u>	\$ <u>250.00</u>	<input checked="" type="checkbox"/> \$ <u>250.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Aggregate jewelry</u> <u>R.C. 2329.66(A)(4)(b)</u>

## 3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Elizabeth A.

Document

Page 19 of 53

Case number (if known)

First Name

Middle Name

Last Name

**Part 2:** Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption</small>	Specific laws that allow exemption
Brief description: <u>Cash</u> Line from Schedule A/B: <u>16</u>	\$ <u>30.00</u>	<input checked="" type="checkbox"/> \$ <u>30.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Cash on hand, money due & payable... R.C. 2329.66(A)(3)
Brief description: <u>Honda Fed-Bank Account</u> Line from Schedule A/B: <u>17.1</u>	\$ <u>200.00</u>	<input checked="" type="checkbox"/> \$ <u>200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Cash on hand, money due & payable... R.C. 2329.66(A)(3)
Brief description: <u>Assorted Clothing</u> Line from Schedule A/B: <u>11</u>	\$ <u>600.00</u>	<input checked="" type="checkbox"/> \$ <u>600.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wearing apparel, beds & bedding (\$... R.C. 2329.66(A)(4)(a)
Brief description: <u>5312 Taywell Drive</u> Line from Schedule A/B: <u>1.1</u>	\$ <u>120,790.00</u>	<input checked="" type="checkbox"/> \$ <u>120,790.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	1 parcel or item of realty or personalty... R.C. 2329.66(A)(1)(b)
Brief description: <u>Honda</u> Line from Schedule A/B: <u>3.1</u>	\$ <u>15,000.00</u>	<input checked="" type="checkbox"/> \$ <u>3,775.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	1 motor vehicle R.C. 2329.66(A)(2)
Brief description: <u>401k-Honda</u> Line from Schedule A/B: <u>21.1</u>	\$ <u>78,496.00</u>	<input checked="" type="checkbox"/> \$ <u>78,496.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Assets & benefits of IRAs, Roth IRA... R.C. 2329.66(A)(10)(c)
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

## Fill in this information to identify your case:

Debtor 1 Elizabeth A. Morgan  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Ohio

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing.

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

## 1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

## Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	--

2.1	Bank of America Creditor's Name  P.O. Box 982238 Number Street  El Paso TX 79998 City State ZIP Code	Describe the property that secures the claim: Residential Property-2nd Mortgage	\$ 25,012.00	\$ 120,790.00	\$
<p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>			<p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>2007</u></p>		
Last 4 digits of account number <u>7 6 1 4</u>					

2.2	Bank of America Creditor's Name  P.O. Box 982238 Number Street  El Paso TX 79998 City State ZIP Code	Describe the property that secures the claim: Residential Property-1st Mortgage	\$ 85,296.00	\$ 120,790.00	\$
<p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>			<p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>2007</u></p>		
Last 4 digits of account number <u>2 5 7 7</u>					

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 110,308.00

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**Part 1:**

## Additional Page

**After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.**

## Column A

**Amount of claim**

Do not deduct the value of collateral.

## Column B

**Value of collateral that supports this claim**

## Column C

**Unsecured portion**  
If any

2.3

**Capital One Auto Finance**

Creditor's Name

P.O. Box 30285

Number

Street

Salt Lake City

UT

84130

City

State

ZIP Code

**Who owes the debt?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Date debt was incurred 2018

**Describe the property that secures the claim:**

\$ 16,787.00 \$ 15,000.00 \$

2016 Honda Accord

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Nature of lien.** Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)  
☐ Statutory lien (such as tax lien, mechanic's lien)  
☐ Judgment lien from a lawsuit  
☐ Other (including a right to offset) \_\_\_\_\_

Last 4 digits of account number 1 0 0 1

**Describe the property that secures the claim:**

\$ \$ \$

Creditor's Name

Number

Street

City

State

ZIP Code

**Who owes the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Date debt was incurred

Last 4 digits of account number

**Describe the property that secures the claim:**

\$ \$ \$

Creditor's Name

Number

Street

City

State

ZIP Code

**Who owes the debt?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this claim relates to a community debt**

Date debt was incurred

Last 4 digits of account number

**Add the dollar value of your entries in Column A on this page. Write that number here:**

\$ 16,787.00

**If this is the last page of your form, add the dollar value totals from all pages.****Write that number here:**

\$ 127,095.00

## Fill in this information to identify your case:

Debtor 1 Elizabeth A. Morgan  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Ohio

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing.

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.  
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

2.1

Total claim	Priority amount	Nonpriority amount
\$ _____	\$ _____	\$ 0.00

Priority Creditor's Name \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

2.2

Total claim	Priority amount	Nonpriority amount
\$ _____	\$ _____	\$ 0.00

Priority Creditor's Name \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations  
☐ Taxes and certain other debts you owe the government  
☐ Claims for death or personal injury while you were intoxicated  
☐ Other. Specify \_\_\_\_\_

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No  
☐ Yes

Debtor 1

Elizabeth

A.

Morgan

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Case number (if known)

First Name

Middle Name

Last Name

**Part 2:** List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than four priority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	<b>Credit Collections</b> Nonpriority Creditor's Name  P.O. Box 607 Number Street  Norwood MA 02062 City State ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 7 9 0 0 \$  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Notice Only: PNC Bank #4147
4.2	<b>Eagle Loan Company</b> Nonpriority Creditor's Name  5808 Wilmington Pike Number Street  Centerville OH 45459 City State ZIP Code  <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 6 6 1 9 \$ 2,587.00  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Revolving Credit
4.3	<b>Eagle Loan Company</b> Nonpriority Creditor's Name  5808 Wilmington Pike Number Street  Centerville OH 45459 City State ZIP Code  <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 5 7 9 5 \$ 2,630.00  <b>When was the debt incurred?</b> 2018  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____

Debtor 1

Elizabeth

A.

Morgan

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Case number (if known)

First Name

Middle Name

Last Name

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4

Greenline Loans, LLC

Nonpriority Creditor's Name

Last 4 digits of account number 1 3 3 7\$ 600.00

3094

Atha Drive

Number

Street

When was the debt incurred? 2018

Bakersfield

CA

93307

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

Who incurred the debt? Check one.

☒

Debtor 1 only

☐

Debtor 2 only

☐

Debtor 1 and Debtor 2 only

☐

At least one of the debtors and another

☐

Check if this claim is for a community debt

Is the claim subject to offset?

☒

No

☐

Yes

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Revolving Credit

4.5

Honda Federal CU

Nonpriority Creditor's Name

Last 4 digits of account number 0 5 0 5\$ 980.00

17655

Echo Drive

Number

Street

When was the debt incurred? 2018

Marysville

OH

43040

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

Who incurred the debt? Check one.

☒

Debtor 1 only

☐

Debtor 2 only

☐

Debtor 1 and Debtor 2 only

☐

At least one of the debtors and another

☐

Check if this claim is for a community debt

Is the claim subject to offset?

☒

No

☐

Yes

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Revolving Credit

4.6

Mariner Finance

Nonpriority Creditor's Name

Last 4 digits of account number 8 6 1 9\$ 1,403.00

8211

Town Center Drive

Number

Street

When was the debt incurred? 2019

Baltimore

MD

21236

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

Who incurred the debt? Check one.

☒

Debtor 1 only

☐

Debtor 2 only

☐

Debtor 1 and Debtor 2 only

☐

At least one of the debtors and another

☐

Check if this claim is for a community debt

Is the claim subject to offset?

☒

No

☐

Yes

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Revolving Credit



Debtor 1

Elizabeth

A.

Morgan

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Case number (if known)

First Name

Middle Name

Last Name

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.7	Merrick Bank Nonpriority Creditor's Name	Last 4 digits of account number <u>9 6 7 8</u>	\$ <u>754.00</u>
	P.O. Box 9201 Number Street	When was the debt incurred? <u>2018</u>	
	Old Bethpage NY 11804 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Revolving Credit</u>	
4.8	PNC Bank Nonpriority Creditor's Name	Last 4 digits of account number <u>4 1 4 7</u>	\$ <u>1,104.00</u>
	P.O. Box 5570 Number Street	When was the debt incurred? <u>2016</u>	
	Cleveland OH 44101 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Overdraft Fees</u>	
4.9	Syncb-Care Credit Nonpriority Creditor's Name	Last 4 digits of account number <u>9 5 6 7</u>	\$ <u>576.00</u>
	P.O. Box 965060 Number Street	When was the debt incurred? <u>2018</u>	
	Orlando FL 32896 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Revolving Credit</u>	

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.10	<b>Synco-JCP</b> Nonpriority Creditor's Name  P.O. Box 965060 Number Street  Orlando FL 32896 City State ZIP Code	Last 4 digits of account number <u>6 5 7 9</u>  When was the debt incurred? <u>2016</u>  As of the date you file, the claim is: Check all that apply.  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Revolving Credit</u>	\$ <u>476.00</u>
4.11	<b>Synco-Lowes</b> Nonpriority Creditor's Name  P.O. Box 956060 Number Street  Orlando FL 32896 City State ZIP Code	Last 4 digits of account number <u>1 2 6 4</u>  When was the debt incurred? <u>2016</u>  As of the date you file, the claim is: Check all that apply.  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Revolving Credit</u>	\$ <u>3,126.00</u>
4.12	<b>Verizon Wireless</b> Nonpriority Creditor's Name  500 Technology Drive, Ste 550 Number Street  Weldon Spring MO 63304 City State ZIP Code	Last 4 digits of account number <u>5 4 8 6</u>  When was the debt incurred? <u>2018</u>  As of the date you file, the claim is: Check all that apply.  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Revolving Credit</u>	\$ <u>941.00</u>

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**Part 4:** Add the Amounts for Each Type of Unsecured Claim

1. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

**Total claim****Total claims  
from Part 1**

6a. Domestic support obligations

6a. \$ 0.00

6b. Taxes and certain other debts you owe the government

6b. \$ 0.00

6c. Claims for death or personal injury while you were intoxicated

6c. \$ 0.00

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d. + \$ 0.00

6e. Total. Add lines 6a through 6d.

6e. \$ 0.00

**Total claim****Total claims  
from Part 2**

6f. Student loans

6f. \$ 0.00

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ 0.00

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ 0.00

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. + \$ 12,547.00

6j. Total. Add lines 6f through 6i.

6j. \$ 12,547.00

Fill in this information to identify your case:

Debtor 1 Elizabeth A. Morgan  
First Name Middle Name Last Name

Debtor 2     
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Ohio

Case number   
(If known)

☐ Check if this is an amended filing.Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.2	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.3	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.4	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	
2.5	Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	

## Fill in this information to identify your case:

Debtor 1 Elizabeth A. Morgan  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Ohio

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing.

## Official Form 106H

## Schedule H: Your Codebtors

12/15

**Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.**

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☐ No  
☒ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

- ☒ No. Go to line 3.  
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
☐ No  
☐ Yes. In which community state or territory did you live? \_\_\_\_\_. Fill in the name and current address of that person.

\_\_\_\_\_  
 Name of your spouse, former spouse, or legal equivalent

\_\_\_\_\_  
 Number Street

\_\_\_\_\_  
 City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

## Column 1: Your codebtor

## Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Randall Morgan  
 Name

327 Deeds Avenue  
 Number Street

Dayton OH 45404  
 City State ZIP Code

- ☐ Schedule D, line \_\_\_\_  
☒ Schedule E/F, line 4.8, 4.11  
☐ Schedule G, line \_\_\_\_

3.2

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Number Street

\_\_\_\_\_  
 City State ZIP Code

- ☐ Schedule D, line \_\_\_\_  
☐ Schedule E/F, line \_\_\_\_  
☐ Schedule G, line \_\_\_\_

3.3

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Number Street

\_\_\_\_\_  
 City State ZIP Code

- ☐ Schedule D, line \_\_\_\_  
☐ Schedule E/F, line \_\_\_\_  
☐ Schedule G, line \_\_\_\_



Debtor 1

Elizabeth

A.

Debtor 1

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Case number (if known)

First Name

Middle Name

Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4. \$ 4,626.45	\$ 4,626.45	\$ 0.00
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 956.94	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 229.67	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 247.72	\$ 0.00
5e. Insurance	5e. \$ 304.28	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: ..	5h. +\$ 0.00	+\$ 0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h	6. \$ 1,738.61	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 2,887.84	\$ 0.00
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if know) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: ..	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: ..	8h. +\$ 0.00	+\$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	9. \$ 0.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,887.84	\$ 0.00 = \$ 2,887.84
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: .. 11. + \$ 0.00		
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data. If it applies.	12. \$ 2,887.84	<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b> <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: ..		

## Fill in this information to identify your case:

Debtor 1 Elizabeth A. Morgan  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Ohio

Case number  
(If known) \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:  
 \_\_\_\_\_  
 MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

## Official Form 106J

## Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Your Household

## 1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No.
- ☐ Yes. Debtor 2 must file a separate Schedule J.

## 2. Do you have dependents

☐ No☒ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 and Debtor 2.

Do not state the dependent's names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son

17

- ☐ No
- ☒ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

## 3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes.

## Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

Your Expenses

## 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,177.00

## If not included on line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00



Debtor 1

Elizabeth

A.

Morgan

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Case number (if known)

First Name

Middle Name

Last Name

		Your Expenses
5.	<b>Additional mortgage payments for your residence, such as home equity loans.</b>	5. \$ 0.00
6.	<b>Utilities:</b>	
6a.	Electricity, heat, natural gas	6a. \$ 230.00
6b.	Water, sewer, garbage collection	6b. \$ 60.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 225.00
6d.	Other. Specify: _____	6d. \$ 0.00
7.	<b>Food and housekeeping supplies</b>	7. \$ 400.00
8.	<b>Childcare and children's educational costs</b>	8. \$ 0.00
9.	<b>Clothing, laundry, and dry cleaning</b>	9. \$ 50.00
10.	<b>Personal care products and services</b>	10. \$ 25.00
11.	<b>Medical and dental expenses</b>	11. \$ 60.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 150.00
13.	<b>Entertainment, clubs recreation, newspapers, magazines, and books</b>	13. \$ 0.00
14.	<b>Charitable contributions and religious donations</b>	14. \$ 0.00
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. \$ 0.00
15b.	Health insurance	15b. \$ 0.00
15c.	Vehicle insurance	15c. \$ 108.00
15d.	Other insurance. Specify: _____	15d. \$ 0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ 0.00
17.	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1	17a. \$ 383.00
17b.	Car payments for Vehicle 2	17b. \$ 0.00
17c.	Other. Specify: _____	17c. \$ 0.00
17d.	Other. Specify: _____	17d. \$ 0.00
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from you pay on line 5, Schedule I, Your Income (Official Form B 6I).</b>	18. \$ 0.00
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. \$ 0.00
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income:</b>	
20a.	Mortgages on other property	20a. \$ 0.00
20b.	Real estate taxes	20b. \$ 0.00
20c.	Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d.	Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e.	Homeowner's association or condominium dues	20e. \$ 0.00

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

21. **Other.** Specify: \_\_\_\_\_

21. \$ 0.00

**22. Calculate your monthly expenses**

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.

22c. Add lines 22a and 22b. The result is your monthly expenses.

\$ 2,868.00

\$ 0.00

22. \$ 2,868.00

**23. Calculate your monthly net income.**23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 2,887.84

23b. Copy your monthly expenses from line 22 above.

23b. -\$ 2,868.00

23c. Subtract your monthly expenses from your monthly income.  
The result is your *monthly net income*.

23c. \$ 19.84

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?:**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification in the terms of your mortgage?

☒ No.☐ Yes.

Explain here:

## Fill in this information to identify your case:

Debtor 1 Elizabeth A. Morgan  
First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing)                                                                 
First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Ohio

Case number                       
 (If known)

☐ Check if this is an amended filing.

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

**Part 1:** Summarize Your Assets**Your assets**

Value of what you own

1. **Schedule A/B: Property** (Official Form 106A/B)1a. Copy line 55, Total real estate, from *Schedule A/B*..... \$ 120,790.001b. Copy line 62, Total personal property, from *Schedule A/B*..... \$ 99,576.001c. Copy line 63, Total of all property on *Schedule A/B* ..... \$ 220,366.00**Part 2:** Summarize Your Liabilities**Your liabilities**

Amount you owe

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of *Schedule D*..... \$ 127,095.003. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F*..... \$ 0.003b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F*..... +\$ 12,547.00**Your total liabilities**\$ 139,642.00**Part 3:** Summarize Your Income and Expenses4. **Schedule I: Your Income** (Official Form 106I)Copy your combined monthly income from line 12 of *Schedule I*..... \$ 2,887.845. **Schedule J: Your Expenses** (Official Form 106J)Copy your monthly expenses from line 22, Column A, of *Schedule J*..... \$ 2,868.00

**Part 4:** Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.  
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 4,626.45

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$ 0.00

Fill in this information to identify your case:

Debtor 1 Elizabeth A. Morgan  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Ohio

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

## Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /S/ Elizabeth A. Morgan  
 Signature of Debtor 1

**X** \_\_\_\_\_  
 Signature of Debtor 2

Date 04/18/2019  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

☐ Check if this is an amended filing

## 04/19

### Part 1: Give Details About Your Marital Status and Where You Lived Before

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**Part 2: Explain the Sources of Your Income****4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No  
☐ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Sources of income Check all that apply.
	Gross income (before deductions and exclusions)	Gross income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$ _____	\$ _____
<b>For last calendar year:</b> (January 1 to December 31, _____) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$ _____	\$ _____
<b>For the calendar year before that:</b> (January 1 to December 31, _____) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$ _____	\$ _____

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No  
☐ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Sources of income Describe below.
	Gross income from each source (before deductions and exclusions)	Gross income from each source (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	_____	_____
	\$ _____	\$ _____
	_____	_____
	\$ _____	\$ _____
	_____	_____
	\$ _____	\$ _____
<b>For last calendar year:</b> (January 1 to December 31, _____) YYYY	_____	_____
	\$ _____	\$ _____
	_____	_____
	\$ _____	\$ _____
	_____	_____
	\$ _____	\$ _____
<b>For the calendar year before that:</b> (January 1 to December 31, _____) YYYY	_____	_____
	\$ _____	\$ _____
	_____	_____
	\$ _____	\$ _____
	_____	_____
	\$ _____	\$ _____





Debtor 1

Elizabeth

A.

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Case number (if known)

First Name

Middle Name

Last Name

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name _____	_____	\$ _____	\$ _____	
Number _____ Street _____	_____			
_____	_____			
City _____ State _____ ZIP Code _____				

Insider's Name _____	_____	\$ _____	\$ _____
Number _____ Street _____	_____		
_____	_____		
City _____ State _____ ZIP Code _____			

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

☒ No☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name _____	_____	\$ _____	\$ _____	
Number _____ Street _____	_____			
_____	_____			
City _____ State _____ ZIP Code _____				

Insider's Name _____	_____	\$ _____	\$ _____
Number _____ Street _____	_____		
_____	_____		
City _____ State _____ ZIP Code _____			

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☒ No☐ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title _____ _____		Court Name _____	<input type="checkbox"/> Pending
Case number _____		Number _____ Street _____	<input type="checkbox"/> On appeal
		City _____ State _____ ZIP Code _____	<input type="checkbox"/> Concluded
Case title _____ _____		Court Name _____	<input type="checkbox"/> Pending
Case number _____		Number _____ Street _____	<input type="checkbox"/> On appeal
		City _____ State _____ ZIP Code _____	<input type="checkbox"/> Concluded

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

☒ No. Go to line 11.☐ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Creditor's Name _____		_____	\$ _____
Number _____ Street _____			
City _____ State _____ ZIP Code _____			

**Explain what happened**

☐ Property was repossessed.

☐ Property was foreclosed.

☐ Property was garnished.

☐ Property was attached, seized, or levied.

	Describe the property	Date	Value of the property
Creditor's Name _____		_____	\$ _____
Number _____ Street _____			
City _____ State _____ ZIP Code _____			

**Explain what happened**

☐ Property was repossessed.

☐ Property was foreclosed.

☐ Property was garnished.

☐ Property was attached, seized, or levied.

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No  
☐ Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount
Number Street City State ZIP Code			\$

Last 4 digits of account number: XXXX-

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No  
☐ Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you			\$
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you			\$

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
<div>Charity's Name</div> <div></div> <div>Number Street</div> <div>City State ZIP Code</div>			<div>\$</div> <div>\$</div>

Part 6:

List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		<div>\$</div>

Part 7:

List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No
☒ Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<div> <div>Brian E. Lusardi</div> <div>Person Who Was Paid</div> <div>85 West Main Street</div> <div>Number Street</div> <div>Xenia OH 45385</div> <div>City State ZIP Code</div> <div>cox_keller@yahoo.com</div> <div>Email or website address</div> <div>Person Who Made the Payment, if Not You</div> </div>	<div>Attorney fee, filing fee, credit report and counseling course fees</div> <div>01/01/2018</div>	<div>\$ 1,330.00</div> <div>\$</div>

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$
Number Street				\$
City State ZIP Code				
Email or website address				
Person Who Made the Payment, if Not You				

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$
Number Street				\$
City State ZIP Code				

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

		Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer				
Number Street				
City State ZIP Code				
Person's relationship to you				
Person Who Received Transfer				
Number Street				
City State ZIP Code				
Person's relationship to you				

Debtor 1

Elizabeth

A.

Document

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Case number (if known)

First Name

Middle Name

Last Name

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No  
☐ Yes. Fill in the details.

Description and value of the property transferred

Date transfer  
was made

Name of trust \_\_\_\_\_

## Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details.

Last 4 digits of account  
numberType of account or  
instrumentDate account was  
closed, sold, moved,  
or transferredLast balance before  
closing or transfer

Name of Financial Institution

XXXX-

☐ Checking

\$ \_\_\_\_\_

Number Street

☐ Savings☐ Money market☐ Brokerage☐ Other \_\_\_\_\_

City State ZIP Code

Last 4 digits of account  
numberType of account or  
instrumentDate account was  
closed, sold, moved,  
or transferredLast balance before  
closing or transfer

Name of Financial Institution

XXXX-

☐ Checking

\$ \_\_\_\_\_

Number Street

☐ Savings☐ Money market☐ Brokerage☐ Other \_\_\_\_\_

City State ZIP Code

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

Who else had access to it?

Describe the contents

Do you still  
have it?

Name of Financial Institution

Name

☐ No☐ Yes

Number Street

Number Street

City State ZIP Code

City State ZIP Code

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No  
☐ Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility _____ Number Street _____ City State ZIP Code _____	Name _____ Number Street _____ City State ZIP Code _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No  
☐ Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name _____ Number Street _____ City State ZIP Code _____		\$ _____

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of Site _____ Number Street _____ City State ZIP Code _____	Governmental unit _____ Number Street _____ City State ZIP Code _____	

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of Site	Governmental unit		
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		
City State ZIP Code	City State ZIP Code		

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Court name		
Number Street		
Case number		
City State ZIP Code	City State ZIP Code	

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.  
☐ Yes. Check all that apply above and fill in the details below for each business.

Business Name  Number Street  City State ZIP Code	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		EIN: —
	Name of accountant or bookkeeper	Dates business existed
		From — To —
Business Name  Number Street  City State ZIP Code	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		EIN: —
	Name of accountant or bookkeeper	Dates business existed
		From — To —



Debtor 1

Elizabeth

A.

Morgan

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Case number (if known)

First Name

Middle Name

Last Name

Describe the nature of the business Business Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____		Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
Name of accountant or bookkeeper _____		

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No  
☐ Yes. Fill in the details below.

Date issued

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

MM / DD / YYYY

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X

/S/ Elizabeth A. Morgan

Signature of Debtor 1

X

Signature of Debtor 2

Date 04/18/2019

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No  
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No  
☐ Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

United States Bankruptcy Court  
Southern District Of Ohio

In re Elizabeth A. Morgan

Case No. \_\_\_\_\_

Debtor

Chapter 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ 925.00

Prior to the filing of this statement I have received ..... \$ 0.00

Balance Due..... \$ 925.00

2. The source of the compensation paid to me was:

☐ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify): Prepaid Legal Insurance

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030)(12/15)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR (Continued)**

d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the Debtor in Adversary Proceedings, Lien Stripping or Avoidance actions.

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.

04/18/2019

*Date*

/S/ Brian E. Lusardi

*Signature of Attorney*

Cox, Keller & Lusardi, LLC

*Name of law firm*

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P.O. BOX 982238  
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SALT LAKE CITY, UT 84130

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CENTERVILLE, OH 45459

GREENLINE LOANS, LLC  
3094 ATHA DRIVE  
BAKERSFIELD, CA 93307

HONDA FEDERAL CU  
17655 ECHO DRIVE  
MARYSVILLE, OH 43040

MARINER FINANCE  
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BALTIMORE, MD 21236

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